DECEIVED

NFA-449UL (2/23/21)

| POTENTIAL HAZAR  | DOUS !                                | WASTESITE                     | I. IDENTIF                            | CATION                         |
|--|---------------------------------------|-------------------------------|---------------------------------------|--------------------------------|
| SEPA 03/00000000 PRELIMINARY   | ASSES                                 | SMENT                         | OT STATE OF                           | SITE NUMBER                    |
| PART 1 - SITE INFORMA  | TION AN                               | D ASSESSMENT                  |                                       | 46170.577                      |
| 11. SITE NAME AND LOCATION Pro  O1 SITE NAME (Legal, common, or descriptive name of site)  Freeman United Coal Mining (SIA)  O3 CITY | aram                                  |                               |                                       |                                |
| 01 SITE NAME (Legal, common, or descriptive name of site)  | 02 TREE                               | A POUTE NO , OR SPE           | CIFIC LOCATION IDENTIFIER             |                                |
| Error 11 to Cool Mining (STA)  | 300                                   | W. Was                        | hinaton                               |                                |
| OSCITY TEEMAN INTITED COULT MINING COLD  | 04 STATE                              | 05 ZIP COO€ 06 C              | OUNTY                                 | 07 COUNTY 08 CONG<br>CODE DIST |
| Chicago  | TL                                    | 60606                         | Cook                                  | 131 17                         |
| 09 COORDINATES ATTITUDE LONGITUDE  |                                       | DOG FI                        |                                       | 1001 101                       |
|  |                                       |                               |                                       | }                              |
| 10 DIRECTIONS TO SITE (Starting from nearest public road)  | <b>!</b>                              |                               | ,                                     | ····                           |
|  |                                       |                               |                                       |                                |
|  |                                       |                               |                                       |                                |
|  |                                       |                               |                                       |                                |
| III. RESPONSIBLE PARTIES   |                                       |                               |                                       |                                |
| 01 OWNER (# known)   | 02 STREE                              | T (Business, mailing, resider | rtiat)                                |                                |
| Jame as abowe  | ļ                                     |                               |                                       |                                |
| 03 CITY  | 04 STATE                              | 05 ZIP CODE                   | 06 TELEPHONE NUMBER                   |                                |
|  |                                       |                               | ,                                     |                                |
| 07 OPERATOR (If known and different from owner)  | UB STREE                              | Ť (Business, muling, resider  | nie)                                  |                                |
|  |                                       |                               |                                       |                                |
| 09 CITY  | 10 STATE                              | 11 ZIP CODE                   | 12 TELEPHONE NUMBER                   |                                |
|  | <u> </u>                              |                               | <u> </u>                              | <u> </u>                       |
| 13 TYPE OF OWNERSHIP (Check one)  PA. PRIVATE   B. FEDERAL:  |                                       | _ D C. STATE                  | D.COUNTY DE.MU                        | NICIPAI                        |
| (Agency name)  |                                       |                               |                                       | WOIF AL                        |
| □ F. OTHER:(Specify)   | · · · · · · · · · · · · · · · · · · · | _ G. UNKNOW                   | rn<br>                                |                                |
| 14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)  |                                       | F. 0.75                       |                                       |                                |
| □ A. RCRA 3001 DATE RECEIVED: / □ B. UNCONTROLL  | LEU WASI                              | E SITE (CERCLA 103 4)         | MONTH D                               | Y YEAR P.C. NONE               |
| IV. CHARACTERIZATION OF POTENTIAL HAZARD   |                                       |                               | ····                                  | ·····                          |
| 01 ON SITE INSPECTION  BY (Check all that apply)  A. EPA  B. EPA   | A CONTRA                              | CTOR C.                       | STATE D. OTHER                        | CONTRACTOR                     |
| YES DATE // DATE DATE DE LOCAL HEALTH OFF  | ICIAL [                               | F. OTHER:                     | (Specify)                             |                                |
| CONTRACTOR NAME(S):  | <u></u>                               |                               | (4,44,24)                             |                                |
| 02 SITE STATUS (Check one) 03 YEARS OF OPER  | ATION                                 | 1                             |                                       |                                |
| ☐ A. ACTIVE ☐ B. INACTIVE Ø C. UNKNOWN   | BEGINNING YE                          | AR ENDING YEA                 | BUNKNOWN                              | i                              |
| 04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED   |                                       |                               |                                       |                                |
| il Mill Children and the   |                                       |                               |                                       |                                |
| Heavy Metals, Sludge, Dily Waste   |                                       |                               |                                       |                                |
|  |                                       |                               |                                       |                                |
| 05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION  |                                       |                               |                                       |                                |
| Ground Water (Population / Environment) Surface Water (Population / Environment)   |                                       |                               |                                       |                                |
| Surface Water (Papulation / Foxigonment)   |                                       |                               |                                       |                                |
| Con and Chepananer / Errina in the   |                                       |                               |                                       |                                |
| V. PRIORITY ASSESSMENT   |                                       |                               |                                       |                                |
| 01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Parts - Weste Infor                                    | melion and Pa                         |                               | us Conditions and Incidenta)          |                                |
| B. MEDIUM (Inspection required promptly)  B. MEDIUM (Inspection required)  (Inspect on time  | avalleble besi                        | D. NONE (No further a         | ction needed, complete current dispos | tion form)                     |
| VI. INFORMATION AVAILABLE FROM   |                                       |                               |                                       |                                |
| 01 CONTACT 02 OF (Agency/Organia   | retion)                               | <del></del>                   |                                       | 03 TELEPHONE NUMBER            |
| KENNETH PAGE IEDA  |                                       |                               |                                       | 1217 7826760                   |
| 04 PERSON RESPONSIBLE FOR ASSESSMENT 05 AGENCY   | 06 ORG                                | ANIZATION                     | 07 TELEPHONE NUMBER                   | OS DATE                        |
| KENNETH PAGE   IFPA  | RDA                                   | 15/PA-ST                      | 1217 782 6760                         | 9,30,87                        |
| EPA FORM 2070-12 (7-81)  | 101/                                  |                               | 12.1 1000/100                         | MONTH DAY YEAR                 |

\$005/0 TW

EPA Region 5 Records Ctr.



**\$EPA** 

## POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT PART 2 - WASTE INFORMATION

I. IDENTIFICATION

O1 STATE O2 SITE NUMBER

ILD 046 170 577

| II. WASTE S'   | TATES, QUANTITIES, AI                              | ND CHARACTER              | ISTICS   |                    |  |  |                                |
|--|--|---------------------------|--|--------------------|--|--|--------------------------------|
|  | TATES (Check at that apply)                        | 02 WASTE QUANT            | TY AT SITE                                       | 03 WASTE CHARACTI  | ERISTICS (Check all that a                     | DCIV'  |                                |
| A SOLID E SLURRY Measures B POWDER FINES PLOUID TONS |  | )NKNOWN                   | ØTOXIC (E)S B CORROSIVE FILE C RADIOACTIVE G R   |                    | TIOUS J EXPLO<br>MABLE K REACT<br>ABLE L INCOM | HIGHLY VOLATILE J EXPLOSIVE K REACTIVE L INCOMPATIBLE M NOT APPLICABLE |                                |
|  | (Specify)  | NO OF DRUMS               | <u> </u>   |                    |  |  |                                |
| III. WASTE T   | YPE  |                           |  |                    |  |  |                                |
| CATEGORY   | SUBSTANCE  | NAME                      | 01 GROSS AMOUNT                                  | 02 UNIT OF MEASURE | 03 COMMENTS                                    |  |                                |
| SLU  | SLUDGE   |                           | UN KNOWN   |                    |  |  |                                |
| OFM  | OILY WASTE   |                           | UNKNOWN  |                    |  |  |                                |
| SOL  | SOLVENTS   |                           |  |                    |  |  |                                |
| PSD  | PESTICIDES   |                           |  |                    |  |  |                                |
| осс  | OTHER ORGANIC C                                    | HEMICALS                  |  |                    |  |  |                                |
| ЮС   | INORGANIC CHEMI                                    | CALS                      |  |                    |  |  |                                |
| ACD  | ACIDS  |                           |  |                    |  |  |                                |
| BAS  | BASES  |                           |  |                    |  |  |                                |
| MES  | HEAVY METALS                                       |                           | UNKNOWN  | <u> </u>           | <u> </u>                                       |  |                                |
| IV. HAZARD   | OUS SUBSTANCES IS.                                 | Appendix for most frequen | tly cited CAS Numbers)                           |                    |  |  | •                              |
| 01 CATEGORY  | 02 SUBSTANCE                                       | NAME                      | 03 CAS NUMBER                                    | 04 STORAGE DIS     | POSAL METHOD                                   | 05 CONCENTRATION   | 06 MEASURE OF<br>CONCENTRATION |
|  |  | ·                         |  | <u> </u>           |  | <u> </u>   | 1                              |
|  |  |                           |  |                    |  |  |                                |
|  |  |                           |  |                    |  |  |                                |
|  |  |                           |  |                    |  |  |                                |
|  |  |                           |  |                    |  |  |                                |
|  |  |                           |  |                    |  |  |                                |
|  |  |                           |  |                    |  |  |                                |
|  | ,  |                           |  |                    |  |  |                                |
|  |  |                           |  |                    |  |  |                                |
|  |  |                           | 1  |                    |  |  |                                |
| <del></del> -  |  | <del></del>               |  |                    | <del></del>                                    |  |                                |
|  | <del></del>  | <del></del>               | <del>                                     </del> | <u> </u>           |  |  | †                              |
|  | †  |                           | 1  | † <del></del>      | <del></del>                                    |  |                                |
|  | <del> </del>                                       | ·                         |  | <b>†</b>           | <del></del>                                    |  | 1                              |
|  |  |                           | <del>                                     </del> | 1                  | <del></del>                                    | <del>                                     </del>                       |                                |
|  |  |                           | 1  | 1                  |  |  |                                |
| V EFENET   | DCKS See Appendix for CAS Nurr                     |                           | <u> </u>   | 1                  |  | L  |                                |
|  | <del>- · · · · · · · · · · · · · · · · · · ·</del> |                           | T 02.046.11.11.11.15.5                           | CATECORY           | 0. 55500                                       | OCH MANE   | 1 02 545 ::::::                |
| CATEGORY   | 01 FEEDSTO   | UN NAME                   | 02 CAS NUMBER                                    | CATEGORY           | UTFEEDST                                       | OCK NAME   | 02 CAS NUMBER                  |
| FDS  |  |                           | <del> </del>                                     | FDS                |  | ···-   | <del> </del>                   |
| FDS  |  |                           | <del> </del>                                     | FDS                | <del></del>                                    |  | <del> </del>                   |
| FDS  | <del></del>  |                           | <del> </del>                                     | FD\$               |  |  | <del> </del>                   |
| FDS  |  |                           |  | FDS                |  | <del> </del>   | l                              |
|  | S OF INFORMATION (CA                               |                           |  | reports )          |  |  |                                |
| Illino   | is EPA Division                                    | File - Lan                | d  |                    |  |  |                                |
|  | - <u>-</u> : • • · ·                               |                           |  |                    |  |  |                                |
| ı  |  |                           |  |                    |  |  |                                |
|  |  |                           |  |                    |  |  |                                |

**SEPA** 

## POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

ILD 046 170 577

| II. HAZARDOUS CONDITIONS AND INCIDENTS  |  |                    |            |
|---|--|--------------------|------------|
| of the second of brine westes /caals  | 02 is OBSERVED (DATE) 04 NARRATIVE DESCRIPTION luvry into the ground water | <b>∠</b> POTENTIAL | ALLEGED    |
| OI B SURFACE WATER CONTAMINATION UNKNOWN OB POPULATION POTENTIALLY AFFECTED UNKNOWN  Surface drainage into nearby s | 02 TOBSERVED (DATE) 04 NARRATIVE DESCRIPTION urface waters                 | POTENTIAL          | .] ALLEGED |
| 01 (1) C CONTAMINATION OF AIR 03 POPULATION POTENTIALLY AFFECTED:   | 02 C OBSERVED (DATE) 04 NARRATIVE DESCRIPTION                              | , . POTENTIAL      | C ALLEGED  |
| 01 © D FIRE/EXPLOSIVE CONDITIONS 03 POPULATION POTENTIALLY AFFECTED   | 02 (1) OBSERVED (DATE:) 04 NARRATIVE DESCRIPTION                           | L: POTENTIAL       | □ ALLEGED  |
| 01 ☐ E. DIRECT CONTACT 03 POPULATION POTENTIALLY AFFECTED.  | 02 □ OBSERVED (DATE) 04 NARRATIVE DESCRIPTION                              | □ POTENTIAL        | . ALLEGED  |
| 01 OF CONTAMINATION OF SOIL UNKNOWN 03 AREA POTENTIALLY AFFECTED: UNKNOWN (Acres) Pit (brine /coal slurry) o locate | 02 - OBSERVED (DATE  | POTENTIAL          | ALLEGED    |
| 01 L3 G. DRINKING WATER CONTAMINATION UN KNOWN 03 POPULATION POTENTIALLY AFFECTED UN KNOWN See A + B                | 02 () OBSERVED (DATE) 04 NARRATIVE DESCRIPTION                             | E POTENTIAL        | ALLEGED    |
| 01 T.H. WORKER EXPOSURE/INJURY 03 WORKERS POTENTIALLY AFFECTED:   | 02 (J OBSERVED (DATE) 04 NARRATIVE DESCRIPTION                             | Li POTENTIAL       | : ALLEGED  |
| 01 © I POPULATION EXPOSURE/INJURY 03 POPULATION POTENTIALLY AFFECTED  | 02 ET OBSERVED (DATE) 04 NARRATIVE DESCRIPTION                             | [] POTENTIAL       | ⊖ ALLEGED  |

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## POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT

PRELIMINARY ASSESSMENT

PRINTING OF MAZABOOUS CONDITIONS AND INCIDENTS

L. IDENTIFICATION

01 STATE 02 SITE NUMBER

T/ N 046 170 577

| HAZARDOUS CONDITIONS AND INCIDENTS (Continued)   |                           |                  |                  |
|--|---------------------------|------------------|------------------|
| 1 B. J. DAMAGE TO FLORA  | 02 C) OBSERVED (DATE:     | B-FOTENTIAL      | ALLEGED          |
| 1 BJ. DAMAGE TO FLORA 4 NARRATIVE DESCRIPTION  Extensive Vegetation Stress is Often activity | ) found as a Result of Su | rface Brine disp | oosal            |
| activity   |                           |                  |                  |
| 1 [] K. DAMAGE TO FAUNA<br>4 NARRATIVE DESCRIPTION (include name(s) of soccess)              | 02 OBSERVED (DATE:        | )   POTENTIAL    | □ ALLEGED        |
| 1 [] L. CONTAMINATION OF FOOD CHAIN<br>4 NARRATIVE DESCRIPTION                               | 02 - OBSERVED (DATE:      | ) DPOTENTIAL     | □ ALLEGED        |
| 1 [] M UNSTABLE CONTAINMENT OF WASTES  | 02 - OBSERVED (DATE.      | ) DOTENTIAL      | □ ALLEGED        |
| 3 POPULATION POTENTIALLY AFFECTED.   | 04 NARRATIVE DESCRIPTION  |                  | •                |
| 1 ( . N. DAMAGE TO OFFSITE PROPERTY<br>4 NARRATIVE DESCRIPTION                               | 02 Li OBSERVED (DATE:     | ) DOTENTIAL      | □ ALLEGED        |
| 1 C. O. CONTAMINATION OF SEWERS, STORM DRAINS, WWI   | Pa 02 □ OBSERVED (DATE:   | ) DPOTENTIAL     | □ ALLEGED        |
| 4 NARRATIVE DESCRIPTION  |                           | ,                | <del>-</del> · · |
| 11 (1) P. ILLEGAL/UNAUTHORIZED DUMPING<br>14 NARRATIVE DESCRIPTION                           | 02 🗆 OBSERVED (DATE:      | ) POTENTIAL      | □ ALLEGED        |
| DE DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR AL  | LEGED HAZARDS             | <del></del>      | <del></del>      |
|  |                           |                  |                  |
| TOTAL POPULATION POTENTIALLY AFFECTED: _U  | NKNO NN                   |                  |                  |
| . COMMENTS   |                           |                  | <del></del>      |
| · —  |                           |                  |                  |
|  |                           |                  |                  |
| SOURCES OF INFORMATION (Crespectic references, e.g. state                                    |                           |                  |                  |
|  | 2 Impoundment Assessmen   | - <del></del>    |                  |

## **EXECUTIVE SUMMARY**

This site has been placed in the ERRIS data base as a result of its selection for evaluation during the federally funded Surface Impoundment Assessment (SIA) Study of 1980. During ERRIS placement, the operator name and business address were utilized from the SIA, which results in deviations from ERRIS for actual site location, Part I, Section II, items 02 through 08 of Form 2070.12. This use of operator name and address has also led to one ERRIS listing representing, in actuality, from one (1) to one hundred eight (108) actual brine pits at an equal number of separate locations.

The only Freeman United Coal Company facility within Chicago, Illinois is the corporate office for Freeman United, which is located at 300 West Washington. Freeman United does operate eleven (11) mines in the State of Illinois. Those mines are discharging to surface water under NPDES permits issued by the State of Illinois. As a normal part of its surface and underground mining operations, numerous ponds were constructed as reservoirs for coal slurry.

Minimal to no file information exists on this site beyond that contained in Phase I of the SIA. There is no direct evidence of hazardous waste disposal at this site beyond the potentially hazardous constituents of Illinois Basin brines, but with only annual inspection by Illinois Mines and Minerals staff relevant to oil production practices and recent backfilling of most brine pits in Illinois, disposal of off-site material of unknown nature is possible. A literature review and laboratory analysis of samples from several other sites indicates concern for contamination of groundwater/surface water by sodium, sulfate, chloride, etc. (non-hazardous constituents), concern for heavy metals (i.e., chrome, vanadium, barium) and long chain hydrocarbons.

A low priority has been assigned due to the probable inability of CERCLA to address brine waste. Similar sites have impacted private and municipal wells to a point requiring users to seek alternative sources for drinking water. A site inspection should be scheduled to verify/update owner-operator information and gain more thorough site specific information if, and when, the addressability of brine damage by CERCLA has been clarified.

KLP:tk:4/24/1-1(9/30/87)